PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

83 50-0537-00

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			W	WO				RATE	FEE	7	RATE	FEE
FOR			NUMBER	NUMBER FILED		BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			4 2 minus 20=		*	20		X\$ 9=		OR	X\$18=	36c
INDEPENDENT CLAIMS			minus 3 =		* U		Ì	X42=		OR	X84=	336
MU	ILTIPLE DEPEN	NDENT CLAIM PE	٠.				+140=		OR	+280=	<u>ارر</u>	
* If the difference in column 1 is less than zero, enter					"0" in (column 2	L	TOTAL		OR	TOTAL	1436
CLAIMS AS AMENDED - PART II]~	OTHER	THAN
(Column 1)				(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	CL AIA	=		X42=		OR	X84=	*
لــــا	FIRST FRESL	INTALION OF WIL	JEHPLE DEF	ENDEN	CLAIN			+140=		OR	+280=	
							L 4	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	
	1.86	(Column 1)		(Colun		(Column 3)	-				ADDIT. FLEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	CL AIM	=		X42=		OR	X84=	
لـــا	THOTTHEOL	MATION OF WIL	LITTLE DE	ENDER	CLAlivi			+140=		OR	+280=	
							A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***		=	t	X42=			X84=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		-			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	If the "Highest Nur If the "Highest Nur	mber Previously Pai mber Previously Pa nber Previously Paid	aid For" IN THIS aid For" IN THIS	S SPACE is S SPACE is	s less than s less tha	n 20, enter "20." In 3, enter "3."	AL	TOTAL DDIT. FEE			TOTAL ADDIT. FEE	